



## Small Business Finance Prequalification

Please complete below then sign and return

Your Assigned Agent: **Versatile Merchant Solutions 30265**

Contact Email: **apps@vmspayments.com**

Contact Number: **1 (804) 897-0201**

Contact Fax: **1 (804) 897-0201**

### Merchant Profile

Business Legal Name:		Business DBA Name:		
Business Legal Address:		Suite or Floor:	City:	State: Zip Code:
Main Business Telephone Number:	Business Email Address:		Website:	
Business Type: Retail      Service      Wholesale      Manufacturing      Other		Product or Services Provided (describe):		
Ownership Type: Corporation      Sole Proprietor      Limited Liability      Company      Partnership		State of incorporation:	Federal Taxpayer Identification Number (EIN):	

### First Owner or Principal's Information

Owner/Principal's Name:		Title:	Date Of Birth:	
Email address:		Phone:	Mobile:	
Address:		City:	State:	Zip Code:
Ownership %:	Length of Ownership: Year(s):      Month(s):	Social Security Number:	Driver's License Number:	

### Second Owner or Principal's Information

Owner/Principal's Name:		Title:	Date Of Birth:	
Email address:		Phone:	Mobile:	
Address:		City:	State:	Zip Code:
Ownership %:	Length of Ownership: Year(s):      Month(s):	Social Security Number:	Driver's License Number:	

### Additional Information

How much money is being requested?	Last year's total gross sales:	How many employees in the business?	Does business accept credit cards? Yes      No	
How does business occupy location: Rent      Lease      Mortgage      Own		Is business up to date on rent, lease or mortgage payments? Yes      No		
Is Business Seasonal?	Yes      No      If Yes:	First month of high season: Last month of high season:	First month of low season: Last month of low season:	
Has business used cash advances before? Yes      No	If yes, what company provided cash advance?	When did business receive advance?	Amount advanced?	Balance Due?
Any prior bankruptcies? Yes      No	If yes, date it was entered into discharged, closed or dismissed?	Any prior tax liens or judgments? Yes      No	If yes, is there a payment plan for this lien or judgment? Yes      No	

### Please Sign Below

By signing below, you certify that (1) you are an authorized owner, principal or decision maker for the business, (2) all information and documents submitted in connection with this application are true, correct and complete; and (3) you authorize Rapid Capital Finance, LLC, its agents, partners, affiliates and lenders to receive credit reports and any other information regarding the Merchant and its owners and principals from third parties, to verify any information provided on the application. You further agree to receive autodialed marketing calls and text messages from or on behalf of Rapid Capital Finance, LLC at any of the phone numbers provided herein and anytime hereafter. You understand that this consent is not a condition of any purchase or funding decision.

Signed \_\_\_\_\_ Print Name \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_